

PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number

10/607,080

Filing Date

06/25/2003

First Named Inventor

Robert W. Allington

Art Unit

1723

Examiner Name

Therkom, Ernest G.

Attorney Docket Number

18-529-8-1

**ENCLOSURES (Check all that apply)**

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete ApplicationReply to Missing Parts  
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional Application

Power of Attorney, Revocation



Change of Correspondence Address



Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_

☐ Landscape Table on CD

Remarks



After Allowance Communication to TC

Appeal Communication to Board  
of Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify  
below):

1. a postcard receipt

2. a check for \$120.00

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Vincent L. Carney Law Office

Signature

*Vincent L. Carney*

Printed name

Vincent L. Carney

Date

May 13, 2005

Reg. No.

20,688

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

*Vincent L. Carney*

Typed or printed name

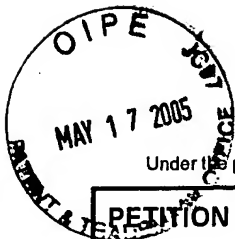
Vincent L. Carney

Date

May 13, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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|   |                           |  |           |
|---|---------------------------|--|-----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br>(fees effective on or after October 1, 2004)   |                           | Docket Number (Optional)<br><b>18-529-8-1</b>                |           |
| Application Number<br><b>10/607,080</b>   |                           | Filed<br><b>06/25/2003</b>                                   |           |
| For <b>SEPARATION SYSTEM, COMPONENTS OF A SEPARATION SYSTEM AND METHODS OF MAKING AND USING THEM</b>  |                           |  |           |
| Art Unit<br><b>1723</b>   |                           | Examiner <b>Therkorn, Ernest G.</b>                          |           |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |                           |  |           |
|   | <u>Fee</u>                | <u>Small Entity Fee</u>                                      |           |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | <del>\$440</del> \$120.00 | <del>\$60.00</del>   | \$ 120.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$430                     | \$215  | \$ _____  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$980                     | \$490  | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1530                    | \$765  | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2080                    | \$1040   | \$ _____  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |                           |  |           |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.   |                           | 05/18/2005 HMARZI1 00000008 10607080<br>01 FC:1251 120.00 OP |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                           |  |           |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |                           |  |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-0778</u> . I have enclosed a duplicate copy of this sheet.                     |                           |  |           |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |                           |  |           |
| I am the <input type="checkbox"/> applicant/inventor.   |                           |  |           |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |                           |  |           |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>20,688</u>  |                           |  |           |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |                           |  |           |
| <u>Vincent L. Carney</u><br>Signature   |                           | <u>May 13, 2005</u><br>Date                                  |           |
| <u>Vincent L. Carney</u><br>Typed or printed name   |                           | <u>402/465-8808</u><br>Telephone Number                      |           |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |                           |  |           |
| <input type="checkbox"/> Total of _____ forms are submitted.  |                           |  |           |

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